



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Dirk Muessig, Max Schaldach

Application No.:

10/072,698

Group No.:

3739

Filed:

02/08/2002

Examiner:

J. Mulcahy

For:

ENDOSCOPIC CATHETER

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee:

\$120.00

CERTIFICATION UNDER 37 C.F.R. § 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope with sufficient postage as first class mail addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-13450.

Signature

Date: August 10, 2005

Michael H. Minns

(type or print name of person certifying)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col	. 2)	(Co	1. 3)	(OTHER THAN A SMALL ENTITY				
	CLAIMS										
	REMAINING	HIGHES	ST NO.								
	AFTER	PREVIOUSLY		PRESENT						ADDIT.	
	AMENDMENT	PAID FOR		EXTRA		RATE				FEE	
TOTAL	10	-	46	=	0	x	\$	50.00	=	\$	0.00
INDEP.	3	_	3		0	х	\$	200.00	=	\$	0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM + \$ 0.00									=	\$	0.00
								TOTAL			
							AD	DIT. FEE		\$	0.00

No additional fee for claims is required.

FEE PAYMENT

Attached is a check in the sum of \$120.00. 5.

FEE DEFICIENCY

6. If an additional fee for claims is required, charge Account No. 15-0450.

Date: August 10,2005 Reg. No.: 31,985

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Signature of Practitioner

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